REQUEST FOR REASONABLE ACCOMMODATIONS

PART I
Name
Street/Mailing Address
City
State
ZIP Code
Preferred Method of Contact
- Day Phone
- Email
- USPS
Email Address
Type of Event:
- Public Meeting/Public Hearing
- Training
- Other (specify) [space provided]
Date of Event
and/or
Date Needed
Location of Event

PART II: LIMITED ENGLISH PROFICIENCY (LEP)

- Yes
- No
Do you need language assistance for LEP?
Language Assistance
- Oral Interpretation (specify language) [space provided]
- Written Translation (specify language) [space provided]
Name of Documents

PART III: AMERICANS WITH DISABILITIES ACT (ADA)

- Yes
- No
Do you need an accommodation for a disability?
Types of Accommodation
- Interpreter for deaf (specify ASL, tactile, etc.) [space provided]
- Assistive Listening device (specify) [space provided]
- Physical location accessible for persons with a physical mobility impairment.
- Other (specify) [space provided]
Nature of Disability (Medical documentation may be requested)
- Physical Mobility Impairment (specify) [space provided]
- Speech Impairment (specify) [space provided]
- Visual impairment (specify) [space provided]
- Hearing Impairment (specify) [space provided]
- Other (specify) [space provided]
Alternative Format (Indicate first, second, third choice if possible.)
- Braille
- Large Print (font point size) [space provided]
- Audio Recording -MP3 [space provided]
- Other (specify) [space provided]
- CD/Flash Drive [space provided]
Name of Documents

For Office Use Only
The accommodation request is:
- Granted as requested
- Granted with change - see additional information
- Denied - see additional information
INSTRUCTIONS:
Requests for Reasonable Accommodations can be made by completing this form. If you prefer to complete this form electronically, go to the City of Dickinson website at www.dickinsongov.com.

You may submit the completed form to: City of Dickinson
99 2nd Street East
Dickinson, ND 58601

The City of Dickinson will contact you to discuss your request.

If you need assistance to complete the Request For Reasonable Accommodations form, please contact Shelly Nameniuk, HR Coordinator, City of Dickinson at 701-456-7801 or shelly.nameniuk@dickinsongov.com. TTY users may use Relay North Dakota at 711 or 1 800-366-6888.

REQUESTS MUST BE MADE AS SOON AS POSSIBLE.
Appropriate provisions will be considered when the City of Dickinson is notified at least 10 days prior to the meeting date or 15 days prior to the date the written comments are due.

Converting printed material may take several weeks.